

State EMS Advisory Council Meeting Minutes

March 10, 2015

11:00 a.m. - 1:00 p.m.

Memorial Medical Center, Carpenter Conference Center
224 W. Carpenter, Springfield, IL 62702

Call to Order-Mike Hansen at 11:00 a.m.

Roll Call and Approval of Minutes-Mike Hansen

Council Members Present: Richard Fantus, M.D., Stephen Holtsford, M.D., George Madland, Connie Mattera, Doug Sears, Ralph Graul, Michael Hansen, J. Thomas Willis, Leslee Stein-Spencer, David Loria, Greg Scott, Randy Faxon, Brad Robinson, Justin Stalter, Jack Whitney, M.D., and Kenneth Pearlman, M.D.

Council Members Absent: Glenn Aldinger, M.D. (proxy to Mike Hansen), Jim Rutledge, George Z. Hevesy, M.D., Kevin Bernard (proxy to Randy Faxon), Herb Sutherland, D.O., Don Davids

Quorum is established.

Approval of Minutes from November 18, 2014 Meeting: Motion for acceptance by Greg Scott, and was seconded by Connie Mattera. Motion to approve passes. No oppositions.

Correspondence: Mike Hansen provided a correspondence back to the new Director of IDPH, Dr. Shah. A letter was set on February 10, 2015 welcoming him to the Illinois Department of Public Health. It was a matter that was practiced in the past to oncoming Director. A message received on Friday, March 6, 2015 from their staff and Dr. Shah is planning to attend the next meeting in June 2015.

The second correspondence is a witness slip for the Task Force on behalf of the EMS Advisory Council for highway safety. Obtained some success in moving out it out of the House.

Public Comments: None at this time.

Additions to the Agenda: Mike Hansen placed Dr. Fantus before the Committee reports to give the Council a quick overview of the Trauma Advisory Council.

Illinois Department of Public Health Report-Jack Fleearty, RN, EMT-P

- **Veterans Bridge Program Curricula:** The Program is still in the development. There has been a change in leadership at Veterans Affairs. Veterans Affairs has taken this project on in affiliation with the Governor's Office, and colleges, Joliet, Peoria and SWIC in Belleville. The goal is to still roll this program out in the Fall of 2015. Joliet College is going through accreditation.
- **Scope of Practice Survey:** The Department did two (2) scope of practice surveys. The first survey was completed, and was sent back to the EMS Medical Directors with clarification on some questions. Both surveys are back in the Department. The Department will summarize the surveys and then will work with Education Committee to determine which education components need to go with the additional skill set that is above the scope of practice in the new education standards. Once completed, they will be "wrapped up" into a packet and pushed out to all EMS System Coordinators and Medical Directors. There will be a "basement" requirement and then a "ceiling" which would include all the optional requirements. System Medical Directors will be able to choose from the optional skills what they wish to actually implement into their systems. All Education programs will be required to provide the initial education. State examinations will have to be modified to test in the same areas.
- **National Registry Imports:** The Department is still working with the licensing vendor and IT staff to be able to receive National Registry imports. This should be done by the end of this fiscal year.

SPECIAL PROGRAMS:

- **Update on Heartsaver AED Grants:** The Department awarded \$33,000 from FY15 Heartsaver AED Grant. The Department received 71 AED grants and awarded all 71 qualified applicants.
- **Rural Upgrade Amendments:** The Rural upgrade amendments are at the EMS Advisory Council for review and comment and are on the agenda. The Department has had several meetings with several

subject matter experts to amend the new EMS rules to reflect the national education standards; and plans to continue to meet every other Thursday. Early this Fall, after both Bills were signed, the Department would meet one Thursday with the State Stroke Advisory Subcommittee to work on the Stroke language and then meet with the opposite Thursday with the Education Standards group. Since the completion of the Stroke language, the Department started meeting with the Educational group four (4) times a month. The new education standards are approximately 65-70% completed.

— **Regulatory:**

- The Stroke Rule amendments were completed approximately 4-5 weeks ago. The Department has been through a couple of legal reviews with Legal Counsel, and they are still with Legal at this time. There were some changes to the EMSC rules and they are also with Legal for review. At some point in the near future, these will be moved over to the EMS Advisory Council.
- **Update on EMS Grants:** The FY16 EMS Assistance Grant fund application is now available on the Department's electronic grant management system (EGraMS). All applications must be completed by Friday, April 3, 2015.

• **Legislation:**

— **Trauma:** The Trauma Legislative and Planning Subcommittee of the Trauma Advisory Council continue to convene and work on administrative rules regarding necessary changes. The Department is also finalizing the "Request for Proposal" for new trauma registry. The proposal has been written and an evaluation tool needs to be developed. The Department continues to work on Trauma data requests for researchers and academic institutions.

- The Department has been working a multi-tier trauma bill for three (3) years and has tried to run it on the legislative agenda. IHA has expressed concerns about shifting and changing healthcare dollars at present. At the last Trauma meeting, the Trauma programs were encouraged reach out to their CEO's and have them to contact IHA directly. The Department has opted not to run the bill and was unsuccessful for this Spring session.

— **Stroke Designations:**

- The stroke applications are being processed as they are received. At the last meeting, the Department had 84 stroke designated hospitals in Illinois. Currently, they have 96. Of those 96, 52 hospitals are primary stroke centers and the other 44 are emergency stroke ready hospitals. The language that came through on Stroke bill last Spring allows the Department to designate comprehensive stroke centers. It will change the name of the emergent stroke ready hospitals to stroke capable hospitals. It will also set up the necessity to do a Stroke Registry. This work will be rolled into the administrative rules coming out in the near future.

• **EMS Pre-hospital Data and Bypass Updates**

— **HBS:** The Department did a web-interphase with CDPH's Intermedix system which would allow all hospitals in the city to utilize this system for the Federal HaVBed System. This was a two-phase project for the Department. Phase one was completed. All bed count reporting is automatically imported into the Department's system. At the same time, the Department was also able to upgrade its system and is now able to report available beds during a disaster within real-time data. The second phase of this project will be to integrate the actual bypass system. Chicago hospitals will be able to report on one system and the rest of the State will report on the State system.

— The Department will be participating in a national reporting drill in May 2015, as required under the HPP program with HHS.

— **Pre-Hospital Database:**

The Department is moving to NEMSIS version 3. This schematron files in the final testing phase should be posted online by the end of the month. Individuals who use third party vendors will be able to use the schematron file as they develop their own software products.

The Department continues to do work on the EMS data access website for EMS System Coordinators and the general public. Information has been provided by Dan Lee regarding the development of a

dashboard. This dashboard would make reporting from the pre-hospital database more accessible. One of objective is the ability to look at benchmark data. The Department continues to work on this project with a projecting launch initially in April 2015.

As the Department moves to NEMSIS Version 3.0, there are only 2% of paper submitters and the Department is at almost 100% electronic. By the end of 2015, the Department predicts that they will be at 100% web-based submission.

- **EMSC Program Updates (November 2014)**

- **Pediatric Pre-hospital Protocols** - The EMSC Pre-hospital Committee is working on 22 pediatric pre-hospital protocols. The American Heart Association is going to roll out their new guidelines in October. Before the new 22 updated protocols are released, the Committee will do a comparison between the AHA criteria to ensure that the standards and recommendations are current.
- **Pediatric Facility Recognition** - Site surveys for those hospitals that meet the Pediatric Facility Recognition Region 2 hospitals will be surveyed in late Spring/early Summer 2015. The Department has received these applications and they are being reviewed. Region 8 hospitals attended an education meeting in February 2015, and will then be surveyed in late Fall/early Winter of 2015. The Department currently has 110 hospitals that participate in the Facility Recognition Program.
- **School Nurse Emergency Care Course** - These courses continue to be taught the Summer of 2015. The EMSC Advisory Board still has an opening. They are looking for either a Pediatric Surgeon or a Trauma Nurse Coordinator. If anyone is interested, contact Evelyn Lyons.
- **Burn Surge Annex** - Additional project is being picked up by the Trauma Advisory Council. There are several activities being related around the preparation and training. The Burn Surge Annex has been completed and is actually being rolled in the State Medical Disaster Plan which is now known as the IDPH ESF-8 Plan. This plan outlines the state response to a large scale burn incident, and provides local guidance. There are currently 5 burn centers in the State of Illinois and would not take very long to overrun these entities in a very large scale.
- There are two (2) Burn Surge Annex Tabletop Exercises that are scheduled in March. One is being run today, Tuesday, March 10, 2015 (Northern Illinois) and the other is scheduled for Tuesday, March 24, 2015 (Central and Southern Illinois). The Department encourages hospitals to participate in these exercises.
- Advanced Burn Life Support (ABLS) provider course will be conducted Saturday, June 6, 2015 at Memorial Medical Center in Springfield, IL. Announcement to be given.
- EMSC developed posters for hospitals for Emergency Departments and pocket cards for EMS. These were distributed to the RHCC for distribution. Anyone needed additional posters or cards, contact Evelyn Lyons and/or IDPH.
- A Burn Education program is under development by an ad hoc committee. This one (1) day course will review burn management principles beyond the initial 24 hours. ABLS focuses on dressing applications, fluid calculations, nutritional needs, and key burn information.
- **Testing Updates:** Revisions to EMT-B and Paramedic examinations have now been completed with changes to both questions and distracters. This second review is now completed and the Department does not anticipate any other reviews. However, today, there is an exception that there are four (4) questions on the examination that the links to the cardiac strips did not get posted. The Department is working with Continental Testing correct this issue. Anyone who has an individual that tested this week, their test will be readjusted. Of note, the practice examinations have been posted as well.
- **Test Results:** The Department has new test score sheets to provide to the Council members.
 - Basic - Pass Rate 1st attempt: 75%
 - Intermediate - 1st attempt, only one person tested in 4th quarter:
 - Paramedic - Pass rate 1st attempt: 77%

The Department processed:

- Reinstatement Applications: 8
- ADA Special Accommodations: 24
- Felony Exceptions Granted: 7

There is a new quarterly report. The Department has been working for four (4) months with testing vendor (i.e., dashboard type report); will be shared with Council later in this meeting. For the quarter coming up at the end of March, the EMS System Coordinators will see the new reports. Any questions or need assistance, contact Stu Thompson. Reports will be reviewed at the next EMS System and Trauma Nurse Specialist Coordinators meeting.

— **Licensing Updates:**

- New License Processed YTD: 879
- Renewals Processed YTD: 1,508
- Reciprocity Processed YTD: 72
- Total Licenses Issued YTD: 13373 (per GLS Report)
- Targeted Rate: 16,000 (annually)

The Department had a five-week backlog for new licenses and has been short a licensing staff member for ten (10) months due to a hiring freeze. The staff worked overtime and the backlog was caught up. In the months of January and June, there is a possibility the Department may see an additional backlog.

There are three (3) systems that will pilot the new T-card correspondence. The goal is to get systems to no longer handle licensing fees. The system will need to send in the individual's T-card with has the Child Support Statement included. The Department will process a new record which will generate a letter to go out to the student. This will advise the student to go to the EMS website for further processing and payment.

Several issues have been fixed. The vendor is stilling working on provisional first responders, EMD licensing, 4-year ambulance licenses. A new AEMT license will have to be created along with stretcher van licensing. A contractor will be employed to assist with the completion of these tasks in April 2015, hopefully.

Committee Reports:

Trauma Advisory Council-Richard Fantus, M.D.:

The Trauma Advisory Council met last Thursday, March 5, 2015 via videoconference with only three (3) sites due to the bad weather. The Council was unable to do official business. The new "Request for Proposal" has been developed for the Trauma Registry. The CQI Subcommittee was tasked in trying to develop and achieve consensus to replace the current conjoined minimum triage patient criteria and surgeon activation trauma patient categorization. In short, what patients require trauma surgeon immediate response; what requires a trauma surgeon versus a specialist; and how many hours a surgeon has to see a patient in a level II. It is 12 hours versus 16 hours. There was not a consensus achieved. The desire to have a multi-tier did not move out of Congress committee. Reflected on what Jack Fleeharty stated earlier.

The update of the Indiana Trauma System is many of those patients end up being transported to Illinois Trauma Centers. There is two (2) level III that are looking to obtain approval, Gary and Crown Point.

Addressed the new process for slipping a bill. There may be a much better voice than what goes on with Trauma issues. There are currently three (3) bills waiting:

- House Bill 1398 in the south suburbs that charge toll and surcharge on cell phones. This would assist in funding the trauma centers, but is not really a solution. Another house bill to make Roseland a level I trauma center for gunshot victims only.
- HB1692 Freestanding Emergency Department on the South.

The Council was unable to vote officially. However, the consensus was to support the multi-tiered trauma system which is all inclusive.

Discussion on witness slip.

Mobile-Integrated Healthcare-George Madland:

The Committee met in February 2015. The work has been completed and submitted to IDPH. The Department had a couple of minor changes to the release form specifically the first moment when checking the home they can't sign for all of their relatives "a release of responsibility". The change was made and resubmitted to IDPH. IDPH is close to finalization.

The Committee discussed the National Association of EMS Officials and the licensing recognition of subspecialties. They discussed the need for data collection for non-emergency services. The argument is that data did not need to be collected and is not the responsibility of IDPH.

The Committee was meeting every other month and is now meeting every month. The next meeting is the fourth Thursday of April 2015 at ICEP.

EMS Data Subcommittee-Mike Hansen:

Dan Lee has sent out letters to EMS System Coordinators, Directors and EMS Advisory Council members. The Subcommittee is looking toward the NEMSIS Version 3 specifications and a NEMSIS element has been developed which are available for viewing. The Subcommittee are reviewing data consistency rules and descriptive. The Illinois Schematron file can be sent to any vendors and will be acceptable for submission to IDPH.

EMS Education-Connie Mattera:

The Committee has met on January 26, 2015 at ICEP and via videoconference, IDPH Marion Regional Office, Illinois Central College and the Bell Building in Springfield. Jack Fleeheart already commented on the tests. Connie reminded everyone in December 2014; the Committee had subject matter expert groups that met in Springfield with Ron Rogers from Continental Test. They went through at least 90 questions from the EMT examination and 90 questions from the Paramedic examination. The data suggested up to that point is the Committee should be at least reviewing the questions. However, this did not mean there were any problems with the questions. There was a handful of each of those groupings where the Committee felt that the particular question should not be tested anymore due to inconsistency in practice.

In following up, new reports were requested to be issued. These reports met the Committee's approval.

Many programs are starting to switch to National Registry testing. It should be noted the Registry had passed some new positions. One was their fees will be increased in 2017. The National Registry also passed a new position statement. As of January 2015, any student who was authorized by the Program to test must have taken the examination within a three-month time span. Data shows that the longer a student is being done with their Program, the worse they will perform on the examinations.

The National Association of EMS Educators has a grant that has been issued by the U.S. Department of Transportation to create a principle investigator to work with the Department of Defense at the National level for a Military Paramedic Bridge Program. There are two (2) concurrent programs being developed on Military Bridge. The two parties are encouraged to collaborate so there are not two (2) different end results. IDOT and NAEMSE are working on this project through the NAEMSO.

The National EMS Management Association published a seven pillars of National EMS Officer Competency. Students are to be measured on the membership and leadership skills for those that are accredited. Also,

the National Association of EMT's issued a position statement on EMS reimbursement reform. A link is available as NAEMT is progressing toward MIH.

The National EMS World published an article on EMS Educators "Overworked and Under Resourced". The Committee had created an EMS job description and an orientation guide for EMS Educators which had been published several years. Connie will send out with a link to an update of this particular report. This tool will help individuals that need to justify their existence to their employers.

The first EMS lead instructor course will be held this weekend at Parkland College in Champaign. There are three (3) others scheduled between now and the end of the year. Dates will be posted. The next Committee meeting is scheduled for April 27, 2015. The Committee will focus on a series of suggestions for what EMS continuing education in Illinois should look like in terms of breakdown of topic matter and possible subject hours.

Question for Jack Fleearty: The Department would request from the Education Committee if they would consider pulling 3-5 people who would work with them once the scope of practice document. Additionally, does the committees have any idea when the continuing education guideline document will be completed.

Answer: Assuming after the next meeting, there will be a consensus and will come out in the next meeting. Connie has asked that someone be a Vice Chair. Mike Dant has been nominated.

EMS Recruitment and Retention-Greg Scott:

The next meeting was scheduled for March 12, 2015. But, there is a conflict and will be moved to March 19, 2015.

There is some uncertainty about the Governor Rural Affairs Council with the change of leadership in the Governor's Office and the Lieutenant Governor's Office. The Committee is still trying to secure on what their initiatives will be and what the Rural Affairs is going to look like, etc.

On I-55 just south of the McClain's exit, Braylen's photo was posted with permission of the parent's. Braylen is now 12 years old thanks to EMS. This is the Recruitment Retention billboard that the Council was able to post for four (4) weeks under a grant. The company that owns the billboard has agreed to leave it up until someone else wants to rent the space. As a tribute to Braylen, the billboard went up the same week of her cardiac arrest event.

Senate Joint Resolution 62 is now House Resolution 1 which did not succeed last year due to the processing delay. It has now successfully passed the House and is moving over to the Senate.

The Committee is still concerned with the reduction in EMS workforce across the board, especially in rural areas. Rural squads are still struggling to meet staffing. They are working with neighboring agencies and pass referendums for ambulance tax bills.

Brief discussion by Mike Hansen regarding House Resolution 1.

Tactical EMS/Mike Hansen: No report.

Emerging Issues/George Madland: The Committee continues to meet every other Monday with a board spectrum of EMS representatives, legal, coordinators, educators, and medical directors. A subcommittee completed work on an equipment list for the minimum for the ambulances and non-transports, alongside Keith Buhs from IDPH.

The Committee discussed the KKK specifications and is working with Keith Buhs on this project as well. They are trying to determine which set of specifications are to be used. Providers are encouraged to check before purchasing with the EMS office to ensure the manufacturer knows the specifications. IDPH did provide a blanket waiver for markings which can be utilized and submitted for review.

The Committee continues to have a strong partnership with the American Heart Association. There are projects to promote a mission life line and the submittal has been extended for another month. Discussion on the EMS Recognition Program.

Discussion on core build specifications. The Council's desire is to create a subcommittee assist with the development of ambulance specifications and equipment. IDPH would prefer to develop the core build specifications and then present to the Council for input.

State Stroke Advisory Subcommittee/Randy Faxon:

The State Stroke Advisory Subcommittee met last week. The Subcommittee was hoping to have new rules to present to the Council. After the November 5, 2015 meeting, the rules were sent to IDPH for review. The rules are still in Legal. The Stroke Subcommittee still has several openings. The Legislation states that the Subcommittee must be diverse. If interested, contact one of the Subcommittee members.

There was a designation change to comprehensive stroke center. It will require National certification plus an annual fee of more than >100 or <500 for all three categories. The money would be used for a Stroke Registry. The other designation as a primary stroke center had no real change, except for adding a fee. The stroke ready hospital would be the third and could either be a National designation or certification, or it can be applied through IDPH.

The Subcommittee wanted to make an additional change. The rule stated that the Subcommittee had to have a pre-hospital specific stroke assessment tool. There was no complete agreement on what tool to utilize. The suggestion is to not specify a stroke assessment tool.

Following some open discussion about a stroke registry, IDPH noted it never stated that it would begin to buy or purchase a registry. The Department will need to follow the State Procurement rules regarding any purchase or contracts in regards to a State Stroke Registry.

Illinois EMS Alliance/Greg Scott:

The Alliance EMS Association began meeting and discussing a lot of advocacy and legislative issues surrounding all different pieces as noted later in the agenda.

Two items have been successful: 1) the logo has been established and agreed and 2) a website has been developed. At the meeting yesterday, the members along with the American Heart Association's success with grassroots efforts in local communities using survivors. The conference call discussed assisting local EMS providers around the State. Also, the meeting was to discuss bringing awareness on success by integrating survivors standing next to EMS providers involved in their story. The group also discussed a rural flex grant opportunity to enhance programs and a possibility of doing a MIH summit.

Old Business

EMT Testing Results/Jack Fleearty:

A new State test result report was submitted to the Council. An overview was given. Afterwards, there was a discussion on various concerns regarding testing.

Mobile-Integrated Healthcare Guidelines Status/Jack Fleearty:

The MIH was discussed previously.

EMS Education Standards, Rules and Regulations/Jack Fleearty:

The Department works on the EMS education standards and rules every Thursday. The Department is approximately 65-70% completed. Once written, the rules will be moved to Legal for a lengthy review. Once release from Legal, the Department will then focus on the scope of practice.

New Business

Infield Upgrade Rules and Regulation Consideration/Mike Hansen & Greg Scott:

Mike Hansen addressed the Council for any questions or concerns regarding the Infield Upgrade Rules. There was one concern regarding Page 47, item. For clarity, the Department explained the definition of

“temperature range control” and the desire to have assurance that medications were not subject to freezing or heat. Brief discussion on enforcement.

Another concern from the Council was on Page 33. The concern was the “notification of EMT killed in the line of duty”. The Department clarified notification would be the next day.

Greg Scott made a motion to accept; seconded by Leslie Stein-Spencer w/recommended changes. No opposition. Motion passed.

Approval: Dr. John Wipfler, Tactical EMS Chair/Mike Hansen:

Mike Hansen gave a brief background on Dr. Wipfler. Mike moved Dr. Wipfler as the new Chair for Tactical EMS; seconded by Greg Scott. Greg gave a brief update on “response to active shooter incidents” and how EMS and law enforcement have developed collaboration. No opposition. Motion passed.

EMS Legislation/Mike Hansen & Greg Scott:

The Council has over 6500 pieces of legislation that they have been reviewing. Copies were submitted to the Council members. Mike Hansen gave a brief overview. Some bills discussed were HB2724 (concealed carry); HB1561 (to include fireworks); and physical needed to donate blood (killed).

Greg Scott thanked the members who “slipped” HR1. It is a joint resolution that has passed House and is moving over to the Senate side. Also, HB4121 (STEMI) has seen success; but delayed. Take an official position on HB4121. Motion to support HB4121; seconded Randy Faxon. Dr. Pearlman had a discussion on HB4121. It was noted the Council should take a stance on more critical bills. Motion was officially withdrawn by Greg Scott; Randy Faxon officially withdrew his seconded. Discussion between Dr. Fantus and Mike Hansen in reference to adding Trauma bills as well. Brief discussion on STEMI. Greg Scott noted the State Fire Marshall opposes HB3796. Their stance is that only EMS providers killed in line of duty and should be eligible for compensation are those employed by a governmental based entity.

Bylaw Change: Videoconferencing/Jack Fleeharty:

Council reimbursement for travel to this EMS Advisory Council meeting was approved by IDPH. However, the Department recommended that Council consider adopting the videoconferencing as the Trauma Advisory Council did previously. The Department mirrored the same language as the Trauma Advisory Council bylaws and placed them into the EMS Advisory Council bylaws and is highlighted in yellow. The topic of discussion is does the Council take into consideration to adopt their bylaw. Motion to accept the recommendation was made by Leslee Stein-Spencer; seconded by George Madland. Motion to add 4.14 to the bylaws. No opposition. Motion passes.

Future Meetings: Dr. Fantus informs Council that the future date for the Joint EMS and Trauma Advisory Council meeting (September 10, 2015) needs to be changed as it conflicts with the National Trauma meeting. The Advisory Councils will meet to affirm another date. The future EMS Advisory Council meeting will be June 11, 2015. Also, EMS Week will be held from May 17, 2015 to May 23, 2015 in the State of Illinois. EMSC Day is usually on that Wednesday.

Adjourn: Motion to adjourn by Greg Scott, and seconded by Leslee Stein-Spencer. No opposition. Meeting adjourned at 1:25 p.m.